BEST AVAILABLE COPY

PATENT APPLICATION FL. DETERMINATION RECORD Effective October 1, 2001

ication or Docket Number 10/019049

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	1 1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	890
TOTAL CHARGEABLE CLAIMS			() minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 = *					X42=		OR	X84=	7
MU	LTIPLE DEPEN	IDENT CLAIM PI					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL	·	OR	TOTAL	890	
CLAIMS AS AMENDED - PART II								OTHER THAN				
(Column 1)			(Column 2) HIGHEST			(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	OL 4114	=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	·	CLAIM			+140=		OR	+280=	
								TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE	<u> </u>	٠٠٠ <i>،</i>	ADDIT. FEE	
		(Column 1) CLAIMS	1	HIGH		(Column 3)	1 6	•	ADDI-			4551
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
AME	Independent	*	Minus	ENDENT CLAIM		=		X42=		OR	X84=	
L	FIRST PRESE	NIATION OF MO	JLI IPLE DEF	ENDENT	CLAIM		'	+140=		OR	+280=	
								TOTAL			TOTAL	
								ADDIT. FEE			ADDIT. FEE	
		(Column 1) CLAIMS	1	(Colur		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
匚	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l þ					
	is the enterior and	4 in leas the - 4	ha anini in acti		. "O" in a-	luma 3		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		imber Previously P nber Previously Pa					er fou	ınd in the app	oropriate bo	k in col	lumn 1.	